



MISSOURI DEPARTMENT OF REVENUE  
DRIVER AND VEHICLE SERVICES BUREAU  
SPECIALTY LICENSE PLATES  
PO BOX 569, JEFFERSON CITY MO 65105-0569  
(573) 751-4509 www.dor.mo.gov/mvdl

FORM  
**5052**  
(REV. 11-04)

### SPECIALTY LICENSE PLATE DEVELOPMENT APPLICATION

THE FOLLOWING ITEMS MUST BE SUBMITTED WITH THIS COMPLETED FORM:

- PROOF ORGANIZATION IS A NOT-FOR-PROFIT ENTITY (IS REGISTERED PURSUANT TO 501 (C) OF THE 1986 INTERNAL REVENUE CODE AS AMENDED, OR EQUIVALENT LAW);
- \$5,000 APPLICATION FEE; AND
- LIST OF 200 POTENTIAL LICENSE PLATE APPLICANTS.

SEE INSTRUCTIONS AND ADDITIONAL INFORMATION ON REVERSE.

#### STEP 1 ORGANIZATION INFORMATION

|                  |                              |            |                |
|------------------|------------------------------|------------|----------------|
| NAME             | Ethan and Friends For Autism |            |                |
| ADDRESS          | [REDACTED]                   |            |                |
| CITY             | [REDACTED]                   | STATE      | [REDACTED]     |
| TELEPHONE NUMBER | ( ) [REDACTED]               | FAX NUMBER | ( ) [REDACTED] |
| E-MAIL ADDRESS   | [REDACTED]                   |            |                |
| WEB SITE ADDRESS | [REDACTED]                   |            |                |

#### STEP 2 ORGANIZATION REPRESENTATIVE/POINT OF CONTACT INFORMATION

|                            |                |                |                |
|----------------------------|----------------|----------------|----------------|
| NAME                       | [REDACTED]     |                |                |
| ADDRESS                    | [REDACTED]     |                |                |
| CITY                       | [REDACTED]     | STATE          | [REDACTED]     |
| TELEPHONE NUMBER           | ( ) [REDACTED] | FAX NUMBER     | ( ) [REDACTED] |
| ALTERNATE TELEPHONE NUMBER | ( ) [REDACTED] | E-MAIL ADDRESS | [REDACTED]     |

#### STEP 3 LEGISLATIVE SPONSOR(S) INFORMATION - AT LEAST ONE CURRENT MEMBER OF THE MISSOURI GENERAL ASSEMBLY MUST BE LISTED

|                           |                    |
|---------------------------|--------------------|
| SPONSOR'S NAME            | SPONSOR'S DISTRICT |
| Jason Crowell             | 127                |
| ADDITIONAL SPONSOR'S NAME | SPONSOR'S DISTRICT |
| Pat Dougherty (PROBABLE)  | 04                 |
| ADDITIONAL SPONSOR'S NAME | SPONSOR'S DISTRICT |
| ADDITIONAL SPONSOR'S NAME | SPONSOR'S DISTRICT |

#### STEP 4 PROPOSED LICENSE PLATE INFORMATION

INDICATE BELOW THE ORGANIZATION'S NAME OR SLOGAN THAT IS TO REPLACE 'SHOW-ME-STATE' (BOTTOM CENTER OF LICENSE PLATE)

**UNDERSTAND AUTISM**

DESCRIPTION OF PROPOSED LICENSE PLATE (E.G., BACKGROUND COLOR, FONT COLOR, COLOR OF 'MISSOURI,' ETC.)

The top third of the plate will be a bright yellow, the middle third white, and the bottom third a dark navy blue. Missouri in red lettering with the squiggly line underneath in navy blue. UNDERSTAND AUTISM at the bottom will be red as well. On the left side of the plate, there will be a small ribbon made up of red, blue, yellow and green puzzle pieces. Over the top of the ribbon in green would be "unlocking Autism..." On the right side of the plate there will be a larger puzzle piece with red, blue and yellow equal in color size with 2 stick figures inside. The words one piece at a time should appear in the puzzle piece as well. Preferred lettering on the license plates would be dark blue.

INCLUDE DRAFT COPY OF THE PROPOSED LICENSE PLATE DESIGN, IF AVAILABLE.

INDICATE THE CONTRIBUTION LEVEL(S) NECESSARY TO OBTAIN AN EMBLEM USE AUTHORIZATION STATEMENT FROM THE ORGANIZATION.

- ☐ NONE ☒ ANNUAL CONTRIBUTION AMOUNT: 20.00
- ☐ ONE-TIME CONTRIBUTION AMOUNT: ☐ BIENNIAL CONTRIBUTION AMOUNT: